

COMBINED DECLARATION AND POWER OF ATTORNEY

As a below named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled METHODS OF USING KAVALACTONE COMPOSITIONS, the specification of which:

- ☒ is attached hereto.
☐ was filed on _ as Application Serial No. _ and was amended on _____.
☐ was described and claimed in PCT International Application No. _____ filed on _____ and as amended under PCT Article 19 on _____.

I hereby state that I have reviewed and understand the contents of the above-identified specification, including the claims, as amended by any amendment referred to above.

I acknowledge the duty to disclose all information I know to be material to patentability in accordance with Title 37, Code of Federal Regulations, §1.56.

I hereby claim the benefit under Title 35, United States Code, §120 of any United States application(s) listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States application in the manner provided by the first paragraph of Title 35, United States Code, §112, I acknowledge the duty to disclose all information I know to be material to patentability as defined in Title 37, Code of Federal Regulations, §1.56(a) which became available between the filing date of the prior application and the national or PCT international filing date of this application:

U.S. Serial No.	Filing Date	Status
09/853,304	May 11, 2001	Pending

I hereby appoint the following attorneys and/or agents to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith:

Jeffrey D. Hsi, Reg. No. 40,024

Y. Rocky Tsao, Reg. No. 34,053

Address all telephone calls to JEFFREY D. HSI at telephone number (617) 542-5070.

Address all correspondence to JEFFREY D. HSI at:

FISH & RICHARDSON P.C.
225 Franklin Street
Boston, Massachusetts 02110-2804

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patents issued thereon.

Combined Declaration and Power of Attorney

Page 2 of 2 Pages

Full Name of Inventor: SHOUJUN CHEN

Inventor's Signature: _____ Date: _____
Residence Address: Billerica, MA
Citizenship:
Post Office Address: 158 Concord Road Apt. K-12, Billerica, MA 01821

Full Name of Inventor: JOEL MCCLEARY

Inventor's Signature: _____ Date: _____
Residence Address: The Plains, VA
Citizenship:
Post Office Address: Roland Farm, 4550 Busthead Road, The Plains, VA 20198

Full Name of Inventor: LIJUN SUN

Inventor's Signature: _____ Date: _____
Residence Address: Harvard, MA
Citizenship: P.R. China
Post Office Address: 148 Depot Road, Harvard, MA 01451

Full Name of Inventor: PETER S. STAATS

Inventor's Signature: _____ Date: _____
Residence Address: Towson, MD
Citizenship:
Post Office Address: Towson, MD